

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|------------|------------|-----------------|
| | <i>C-H</i> | | <i>10-15-01</i> |
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | <i>49</i> | <i>10/29/01</i> |
| FORMALITY REVIEW | <i>MH</i> | <i>920</i> | <i>11-13-01</i> |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

| Claim | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
 staple additional sheet here

(LEFT INSIDE)

67
11/13/01